

**Department of Public Health and Social Services
Division of Environmental Health
Food Establishment Inspection Report**

Page 1 of 3

INSPECTION	RSN	TYPE	GRADE	INSPECTION DATE	ESTABLISHMENT NAME	
Regular		<input checked="" type="checkbox"/>	7 A	10 / 30 / 2018	Denny's Micronesia Mall	
Follow-up				TIME IN	TIME OUT	PERMIT HOLDER
Complaint	<input checked="" type="checkbox"/>			9:30 am	12:30 PM	Denny's of Guam, Inc.
Investigation				SANITARY PERMIT NO.		LOCATION (Address)
Other:				180001066	Lot 5047-1-2; Route 16 Micronesian Mall, Dededo	
ESTABLISHMENT TYPE				AREA	TELEPHONE	
Restaurant				1	637-1802	
No. of Risk Factor/Intervention Violations					1	
No. of Repeat Risk Factor/Intervention Violations					0	
					RISK CATEGORY 3	

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Circle or mark "X" designated compliance (IN, OUT, N/A) for each numbered item. Mark "X" in appropriate box for COS and/or R.

IN = in compliance OUT = Not in compliance N/A = Not applicable COS = Corrected on-site during inspection R = Repeat violation PTS = Demerit points

Compliance Status				COS	R	PTS
Supervision						
1	<input checked="" type="checkbox"/> OUT	Person in charge present, demonstrates knowledge, and performs duties				6
Employee Health						
2	<input checked="" type="checkbox"/> OUT	Management awareness; policy present				6
3	<input checked="" type="checkbox"/> OUT	Proper use of reporting, restriction & exclusion				6
Good Hygienic Practices						
4	<input checked="" type="checkbox"/> OUT N/A N/O	Proper eating, tasting, drinking, betelnut, or tobacco use				6
5	<input checked="" type="checkbox"/> OUT N/A N/O	No discharge from eyes, nose, and mouth				6
Preventing Contamination by Hands						
6	<input checked="" type="checkbox"/> OUT N/A N/O	Hands clean and properly washed				6
7	<input checked="" type="checkbox"/> OUT N/A N/O	No bare hand contact with ready-to-eat foods or approved alternate method properly followed				6
8	<input checked="" type="checkbox"/> OUT	Adequate handwashing facilities supplied & accessible				6
Approved Source						
9	<input checked="" type="checkbox"/> OUT	Food obtained from approved source				6
10	IN OUT N/A <input checked="" type="checkbox"/> COS	Food received at proper temperature				6
11	<input checked="" type="checkbox"/> OUT	Food in good condition, safe, and unadulterated				6
12	IN OUT <input checked="" type="checkbox"/> N/A N/O	Required records available: shellstock tags, parasite destruction				6
Protection from Contamination						
13	IN <input checked="" type="checkbox"/> OUT N/A	Food separated and protected				6
14	<input checked="" type="checkbox"/> OUT N/A	Food contact surfaces: cleaned & sanitized				6
15	<input checked="" type="checkbox"/> OUT	Proper disposition of returned, previously served, reconditioned, and unsafe food				6

Compliance Status				COS	R	PTS
Potentially Hazardous Food (TCS Food)						
16	IN OUT N/A <input checked="" type="checkbox"/> COS	Proper cooking time and temperatures				6
17	IN OUT N/A <input checked="" type="checkbox"/> COS	Proper reheating procedures for hot holding				6
18	IN OUT N/A <input checked="" type="checkbox"/> COS	Proper cooling time and temperature				6
19	<input checked="" type="checkbox"/> OUT N/A N/O	Proper hot holding temperatures				6
20	IN <input checked="" type="checkbox"/> OUT N/A	Proper cold holding temperatures		<input checked="" type="checkbox"/>		6
21	<input checked="" type="checkbox"/> OUT N/A N/O	Proper date marking and disposition				6
Consumer Advisory						
22	IN OUT <input checked="" type="checkbox"/>	Consumer Advisory provided for raw or undercooked foods				6
Highly Susceptible Populations						
23	IN OUT <input checked="" type="checkbox"/>	Pasteurized Foods used; prohibited foods not offered				6
Chemical						
24	<input checked="" type="checkbox"/> OUT N/A	Food additives: approved and properly used				6
25	<input checked="" type="checkbox"/> OUT	Toxic substances properly identified, stored, used				6
Conformance with Approved Procedures						
26	IN OUT <input checked="" type="checkbox"/>	Compliance with variance, specialized process, and HACCP plan				6

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health interventions are control measures to prevent foodborne illness or injury.

GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the introduction of pathogens, chemicals, and physical objects into foods.

Mark "X" in box. If numbered item is not in compliance and/or if COS and/or R. COS = Corrected on-site during inspection R = Repeat violation PTS = Demerit points

Compliance Status				COS	R	PTS
Safe Food and Water						
27		Pasteurized eggs used where required				1
28		Water and ice from approved source				2
29		Variance obtained for specialized processing methods				1
Food Temperature Control						
30		Proper cooling methods used; adequate equipment for temperature control				1
31		Plant food properly cooked for hot holding				1
32		Approved thawing methods used				1
33		Thermometer provided and accurate				1
Food Identification						
34		Food properly labeled; original container				1
Prevention of Food Contamination						
35		Insects, rodents, and animals not present				2
36		Contamination prevented during food preparation, storage & display				1
37		Personal cleanliness				1
38		Wiping cloths: properly used and stored				1
39		Washing fruits and vegetables				1

Compliance Status				COS	R	PTS
Proper Use of Utensils						
40		In-use utensils: properly stored				1
41		Utensils, equipment and linens: properly stored, dried, handled				1
42		Single-use/single-service articles: properly stored, used				1
43		Gloves used properly				1
Utensils, Equipment and Vending						
44	<input checked="" type="checkbox"/>	Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used				1
45		Warewashing facilities: installed, maintained, used; test strips				1
46		Nonfood-contact surfaces clean				1
Physical Facilities						
47		Hot & cold water available, adequate pressure				2
48		Plumbing installed; proper backflow devices				2
49		Sewage and wastewater properly disposed				2
50		Toilet facilities: properly constructed, supplied, & cleaned				2
51		Garbage/refuse properly disposed; facilities maintained				2
52		Physical facilities installed, maintained, and clean				1
53		Adequate ventilation and lighting; designated areas use				1
Documents and Placards						
54		Sanitary Permit, Health Certificates valid and posted				NA

I have read and understand the above violation(s), and
I am aware of the corrective measures that shall be taken.

Person In Charge (Print and Sign) <u>FLORENTINA TAGAMA</u>	Date: <u>10/30/18</u>	Follow-up (Mark one): <u>YES</u> NO
DEH Inspector (Print and Sign) <u>J. GARCIA EPH01</u>	Follow-up Date <u>11/14/18</u>	

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Page 2 of 3

ESTABLISHMENT NAME Denny's Micronesia Mall		LOCATION (Address) Lot 5047-1-2; Route 16 Micronesia Mall, Dededo
INSPECTION DATE 10 / 30 / 2018	SANITARY PERMIT NO. 180001066	PERMIT HOLDER Denny's of Guam

TEMPERATURE OBSERVATIONS

Item/Location	Temperature (° F)	Item/Location	Temperature (° F)
Beef/chiller closest to walk-in freezer	28.5	Chicken/chiller drawer	35.5
Steak/chiller closest to walk-in freezer	41.5	Tocino/large chiller	41.5
Chicken/chiller closest to walk-in freezer	37.5	Portuguese sausage/large chiller	41.5
Fish/chiller closest to walk-in freezer	45.0	Corn beef/large chiller	41.5
Steak/chiller closest to walk-in freezer	49.0	Meatloaf/large chiller	42.5
Chicken/chiller	60.5	Beef/large chiller	34.0
Tuna mix/chiller	61.5	Chicken/large chiller	29.5
Shrimp/chiller	57.0	Rice/rice cooker	160.5
Raw shelled egg/large chiller	42.5	Beef stew/warmer	187.0
Longanisa/large chiller	41.0	Steak/chiller drawer	38.5

ITEM NO.	OBSERVATIONS AND CORRECTIVE ACTIONS	CORRECT BY DATE
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Violations cited in this report must be corrected within the time frames indicated, or as stated in Sections 8-406.11 and 8-406.11 of the Guam Food Code.

	A regular inspection was conducted based on complaint No. 18-147A regarding "either under arm or pubescent hair with follicle" in food. No evidence to support the complaint was observed during the time of inspection.	
	Previous inspection conducted on 9/14/2017 (8/A).	
	The following violations were observed.	
13	Food items such as chicken not properly protected in chiller. All food shall be properly covered and stored to prevent cross-contamination.	10/9/18
20	Multiple potentially hazard food (PHF)/ time and temperature control for safety (TCS) food such as shrimp, tuna mix, chicken, fish, and steak did not meet temperature requirement for cold holding. PHF/TCS food shall be maintained at internal temperature of 41F or below for cold holding to limit pathogen growth. (COS: shrimp, tuna mix, chicken, fish, and steak mentioned above were discarded by staff)	COS
44	Seals on large chiller door in disrepair. All chiller units shall be kept in good repair to ensure the proper cold holding	11/29/18

Based on the inspection today, the items listed above identify violations which shall be corrected by the date specified by the Department. Failure to comply may result in the immediate suspension of the Sanitary Permit or downgrade. If seeking to appeal the result of any notice or inspection findings, a written request for hearing must be submitted to the Director within the period of time established in the notice for corrections.

Person In Charge (Print and Sign)	Date:
DEH Inspector (Print and Sign)	Date:

J. Garcia EPH01 *FLORENTINO C. AGANAN* 10/30/18
C. TAKASE EPH01 10/30/18

ESTABLISHMENT NAME Denny's Micronesia Mall		LOCATION (Address) Lot 5047 -1-2; Route 16 Micronesia Mall Dededo, Guam
INSPECTION DATE 10 / 30 / 2018	SANITARY PERMIT NO. 180001066	PERMIT HOLDER Denny's Of Guam, Inc.

ITEM NO.	OBSERVATIONS AND CORRECTIVE ACTIONS	CORRECT BY DATE
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Violations cited in this report must be corrected within the time frames indicated, or as stated in Sections 8-405.11 and 8-406.11 of the Guam Food Code.

[illegible]

Based on the inspection today, the items listed above identify violations which shall be corrected by the date specified by the Department. Failure to comply may result in the immediate suspension of the Sanitary Permit or downgrade. If seeking to appeal the result of any notice or inspection findings, a written request for hearing must be submitted to the Director within the period of time established in the notice for corrections.

Person In Charge (Print and Sign)

Date: 10/30/18

DEH Inspector (Print and Sign)

Date: 10/30/18